

United States Bankruptcy Court

Eastern District of Wisconsin

Voluntary Petition

| | |
|--|--|
| Name of Debtor (if individual, enter Last, First, Middle): Lekovic, Vladimir | Name of Joint Debtor (Spouse) (Last, First, Middle): Lekovic, Marija |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): FKA Marija Nikolic |
| Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-7514 | Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-6771 |
| Street Address of Debtor (No. and Street, City, and State): 6426 S. 35th Street #8 Franklin, WI <div style="text-align: right;">ZIP Code 53132</div> | Street Address of Joint Debtor (No. and Street, City, and State): 6426 S. 35th Street #8 Franklin, WI <div style="text-align: right;">ZIP Code 53132</div> |
| County of Residence or of the Principal Place of Business: Milwaukee | County of Residence or of the Principal Place of Business: Milwaukee |
| Mailing Address of Debtor (if different from street address): <div style="text-align: right;">ZIP Code</div> | Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right;">ZIP Code</div> |
| Location of Principal Assets of Business Debtor (if different from street address above): | |

| | | |
|--|---|---|
| Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.) | Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code). | Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts. |
|--|---|---|

| | |
|--|---|
| Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. | Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (<i>amount subject to adjustment on 4/01/13 and every three years thereafter</i>). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). |
|--|---|

| | |
|---|----------------------------------|
| Statistical/Administrative Information *** Gregory T. Dantzman 1032430 *** <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. Estimated Number of Creditors <div style="display: flex; justify-content: space-between;"> <div><input type="checkbox"/> 1-49</div> <div><input checked="" type="checkbox"/> 50-99</div> <div><input type="checkbox"/> 100-199</div> <div><input type="checkbox"/> 200-999</div> <div><input type="checkbox"/> 1,000-5,000</div> <div><input type="checkbox"/> 5,001-10,000</div> <div><input type="checkbox"/> 10,001-25,000</div> <div><input type="checkbox"/> 25,001-50,000</div> <div><input type="checkbox"/> 50,001-100,000</div> <div><input type="checkbox"/> OVER 100,000</div> </div> Estimated Assets <div style="display: flex; justify-content: space-between;"> <div><input checked="" type="checkbox"/> \$0 to \$50,000</div> <div><input type="checkbox"/> \$50,001 to \$100,000</div> <div><input type="checkbox"/> \$100,001 to \$500,000</div> <div><input type="checkbox"/> \$500,001 to \$1 million</div> <div><input type="checkbox"/> \$1,000,001 to \$10 million</div> <div><input type="checkbox"/> \$10,000,001 to \$50 million</div> <div><input type="checkbox"/> \$50,000,001 to \$100 million</div> <div><input type="checkbox"/> \$100,000,001 to \$500 million</div> <div><input type="checkbox"/> \$500,000,001 to \$1 billion</div> <div><input type="checkbox"/> More than \$1 billion</div> </div> Estimated Liabilities <div style="display: flex; justify-content: space-between;"> <div><input type="checkbox"/> \$0 to \$50,000</div> <div><input type="checkbox"/> \$50,001 to \$100,000</div> <div><input checked="" type="checkbox"/> \$100,001 to \$500,000</div> <div><input type="checkbox"/> \$500,001 to \$1 million</div> <div><input type="checkbox"/> \$1,000,001 to \$10 million</div> <div><input type="checkbox"/> \$10,000,001 to \$50 million</div> <div><input type="checkbox"/> \$50,000,001 to \$100 million</div> <div><input type="checkbox"/> \$100,000,001 to \$500 million</div> <div><input type="checkbox"/> \$500,000,001 to \$1 billion</div> <div><input type="checkbox"/> More than \$1 billion</div> </div> | THIS SPACE IS FOR COURT USE ONLY |
|---|----------------------------------|

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Lekovic, Vladimir**Lekovic, Marija****All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)

Location

Where Filed: **- None -**

Case Number:

Date Filed:

Location

Where Filed:

Case Number:

Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor:

- None -

Case Number:

Date Filed:

District:

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.

Exhibit B

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

X /s/ Gregory T. Dantzman**August 5, 2010**

Signature of Attorney for Debtor(s)

(Date)

Gregory T. Dantzman 1032430**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.

☒ No.

Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☒ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

Information Regarding the Debtor - Venue

(Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)

(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Lekovic, Vladimir**Lekovic, Marija****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Vladimir LekovicSignature of Debtor **Vladimir Lekovic****X /s/ Marija Lekovic**Signature of Joint Debtor **Marija Lekovic**

Telephone Number (If not represented by attorney)

August 5, 2010

Date

Signature of Attorney***X /s/ Gregory T. Dantzman**

Signature of Attorney for Debtor(s)

Gregory T. Dantzman 1032430

Printed Name of Attorney for Debtor(s)

Law Offices of Dantzman & Dantzman

Firm Name

**324 E. Wisconsin Ave
Milwaukee, WI 53202**

Address

414-831-0427 Fax: 414-831-0428

Telephone Number

August 5, 2010

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

United States Bankruptcy Court
Eastern District of Wisconsin

In re Vladimir Lekovic
Marija Lekovic

Debtor(s)

Case No. _____

Chapter

7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Vladimir Lekovic

Vladimir Lekovic

Date: August 5, 2010

**United States Bankruptcy Court
Eastern District of Wisconsin**

In re **Vladimir Lekovic
Marija Lekovic**

Debtor(s)

Case No. _____

Chapter

7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Marija Lekovic
Marija Lekovic

Date: August 5, 2010

United States Bankruptcy Court
Eastern District of Wisconsin

In re **Vladimir Lekovic,**
Marija Lekovic

Debtors

Case No. _____

Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|------------------|------------------|-------------------|-----------------|
| A - Real Property | Yes | 1 | 0.00 | | |
| B - Personal Property | Yes | 5 | 18,496.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 2 | | 22,239.89 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 26 | | 93,298.94 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 1 | | | 3,780.75 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 2 | | | 3,713.25 |
| Total Number of Sheets of ALL Schedules | | 41 | | | |
| Total Assets | | | 18,496.00 | | |
| Total Liabilities | | | | 115,538.83 | |

United States Bankruptcy Court
Eastern District of Wisconsin

In re **Vladimir Lekovic,**
Marija Lekovic

Debtors

Case No. _____

Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

- ☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|-------------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Student Loan Obligations (from Schedule F) | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 0.00 |

State the following:

| | |
|---|-----------------|
| Average Income (from Schedule I, Line 16) | 3,780.75 |
| Average Expenses (from Schedule J, Line 18) | 3,713.25 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 3,655.86 |

State the following:

| | | |
|--|-------------|-------------------|
| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | 9,439.89 |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | 0.00 |
| 4. Total from Schedule F | | 93,298.94 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | 102,738.83 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property | Nature of Debtor's Interest in Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption | Amount of Secured Claim |
|--------------------------------------|---|------------------------------------|--|-------------------------|
|--------------------------------------|---|------------------------------------|--|-------------------------|

None

Sub-Total >

0.00

(Total of this page)

Total >

0.00

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|--|------------------|--|---|---|
| 1. Cash on hand | X | | | |
| 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | (Joint) checking and savings account(s) with US Bank | C | 400.00 |
| 3. Security deposits with public utilities, telephone companies, landlords, and others. | | Security deposit with landlord, no current cash value | C | 0.00 |
| 4. Household goods and furnishings, including audio, video, and computer equipment. | | Household goods - (See attached itemization) | C | 853.00 |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | | |
| 6. Wearing apparel. | | Necessary clothing | C | 150.00 |
| 7. Furs and jewelry. | | Misc. jewelry & wedding bands | C | 250.00 |
| 8. Firearms and sports, photographic, and other hobby equipment. | X | | | |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | | Term life insurance policy, no cash surrender value | C | 0.00 |
| 10. Annuities. Itemize and name each issuer. | X | | | |

Sub-Total > **1,653.00**
(Total of this page)

3 continuation sheets attached to the Schedule of Personal Property

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|--|---|---|
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | | (Wife) just started a 401K Plan, employer provided 100% exempt | C | 43.00 |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. Accounts receivable. | | (Husband) is owed \$3,000-\$4,000 for back wages from a previous employer. That employer has filed for bankruptcy protection and the debt may be uncollectible. | C | 4,000.00 |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |

Sub-Total > **4,043.00**
(Total of this page)

Sheet 1 of 3 continuation sheets attached
to the Schedule of Personal Property

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|--|---|---|
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| 22. Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories. | | 1992 BMW 325(i) 160,000 miles. Kelley Blue Book, private party replacement value (fair condition) \$1,400 | C | 1,400.00 |
| | | 2008 Nissan Sentra, 52,000 miles. Kelley Blue Book, private party replacement value | C | 11,400.00 |
| 26. Boats, motors, and accessories. | X | | | |
| 27. Aircraft and accessories. | X | | | |
| 28. Office equipment, furnishings, and supplies. | X | | | |
| 29. Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. Inventory. | X | | | |
| 31. Animals. | X | | | |
| 32. Crops - growing or harvested. Give particulars. | X | | | |
| 33. Farming equipment and implements. | X | | | |

Sub-Total > **12,800.00**
(Total of this page)

Sheet 2 of 3 continuation sheets attached
to the Schedule of Personal Property

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|--------------------------------------|---|---|
| 34. Farm supplies, chemicals, and feed. | X | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |

Sub-Total > **0.00**

(Total of this page)

Total > **18,496.00**

YOUR HOUSEHOLD INVENTORY

Please check the item(s) which you own, then provide the Replacement Value. Replacement value means the price a retail merchant would charge for property of that kind considering the age and condition of the property as of the date your case is filed. 11 U.S.C. § 506

| | Replacement Value |
|---|----------------------|
| <input type="checkbox"/> Stove/Cooking Unit | \$ _____ |
| <input type="checkbox"/> Refrigerator | \$ _____ |
| <input type="checkbox"/> Washer/Dryer | \$ _____ |
| <input type="checkbox"/> Microwave | \$ <u>3</u> |
| <input type="checkbox"/> Cooking Utensils | \$ <u>10</u> |
| <input type="checkbox"/> Silverware/Fishware | \$ <u>10</u> |
| <input type="checkbox"/> Cookware (Pots/Pans) | \$ <u>5</u> |
| <input type="checkbox"/> Living Room Furniture | \$ <u>150</u> |
| <input type="checkbox"/> Dining Room Furniture | \$ <u>50</u> |
| <input type="checkbox"/> Tables and Chairs | \$ _____ |
| <input type="checkbox"/> Televisions(s) | \$ <u>100</u> |
| <input type="checkbox"/> VCR(s) Player | \$ _____ |
| <input type="checkbox"/> DVD(s) Player | \$ <u>25</u> |
| <input type="checkbox"/> Compact Discs/Dvds(s) | \$ _____ |
| <input type="checkbox"/> All Other Stereo Equipment | \$ _____ |
| Describe item(s): _____ | |
| <input type="checkbox"/> Bedroom Furniture | \$ <u>100</u> |
| <input type="checkbox"/> Dressers/Nightstands | \$ _____ |
| <input type="checkbox"/> Lamps and Accessories | \$ <u>15</u> |
| <input type="checkbox"/> Wedding Rings | \$ <u>250</u> |
| <input type="checkbox"/> Other Jewelry/Watches | \$ _____ |
| Describe item(s): _____ | |
| <input type="checkbox"/> Furs | \$ _____ |
| <input type="checkbox"/> Computer(s) | \$ <u>300</u> |
| <input type="checkbox"/> Computer Printers | \$ _____ |
| <input type="checkbox"/> Desks/Office Furniture | \$ <u>15</u> |
| <input type="checkbox"/> Other Computer Equipment | \$ _____ |
| Describe item(s): _____ | |
| <input type="checkbox"/> Photography Equipment | \$ _____ |
| <input type="checkbox"/> Satellite Dishes | \$ _____ |
| <input type="checkbox"/> All Clothing | \$ <u>150</u> |
| (including shoes, coats, hats, etc.) | |
| <input type="checkbox"/> Collectibles | \$ _____ |
| Describe item(s): _____ | |

| | |
|---|----------|
| <input type="checkbox"/> Paintings/Art | \$ _____ |
| Describe item(s): _____ | |
| <input type="checkbox"/> Carpenters Tools | \$ _____ |
| Describe item(s): _____ | |
| <input type="checkbox"/> Mechanics Tools | \$ _____ |
| Describe item(s): _____ | |
| <input type="checkbox"/> Guns and Firearms | \$ _____ |
| Describe item(s): _____ | |
| <input type="checkbox"/> Lawnmower | \$ _____ |
| <input type="checkbox"/> Boats | \$ _____ |
| <input type="checkbox"/> Trailers | \$ _____ |
| <input type="checkbox"/> Campers | \$ _____ |
| <input type="checkbox"/> Yard Tools/Equipment | \$ _____ |
| <input type="checkbox"/> Swimming Pool | \$ _____ |
| <input type="checkbox"/> Cell Phones | \$ _____ |

OTHER ASSETS

| | |
|---|----------------------------------|
| <input type="checkbox"/> Rent deposit with landlord | \$ <u>200.00</u> |
| Name of Landlord <u>TRIKE PROPERTY MANAGEMENT</u> | |
| Address <u>P.O. Box 11159</u> | |
| City <u>MILWAUKEE</u> | State <u>WI</u> Zip <u>53211</u> |
| <input type="checkbox"/> Government Bonds | \$ _____ |
| <input type="checkbox"/> Certificate of Deposits | \$ _____ |
| <input type="checkbox"/> Copyrights/Patents | \$ _____ |
| <input type="checkbox"/> Aircraft | \$ _____ |
| <input type="checkbox"/> | \$ _____ |
| <input type="checkbox"/> | \$ _____ |
| <input type="checkbox"/> | \$ _____ |
| <input type="checkbox"/> | \$ _____ |
| <input type="checkbox"/> | \$ _____ |
| <input type="checkbox"/> | \$ _____ |
| <input type="checkbox"/> | \$ _____ |
| <input type="checkbox"/> | \$ _____ |
| <input type="checkbox"/> | \$ _____ |
| <input type="checkbox"/> | \$ _____ |
| <input type="checkbox"/> | \$ _____ |
| <input type="checkbox"/> | \$ _____ |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPTDebtor claims the exemptions to which debtor is entitled under:
(Check one box)

- ☒ 11 U.S.C. §522(b)(2)
☐ 11 U.S.C. §522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds
 \$146,450. (Amount subject to adjustment on 4/1/13, and every three years thereafter
 with respect to cases commenced on or after the date of adjustment.)

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|---|--------------------------------------|----------------------------|---|
| Checking, Savings, or Other Financial Accounts, Certificates of Deposit | | | |
| (Joint) checking and savings account(s) with US Bank | 11 U.S.C. § 522(d)(5) | 400.00 | 400.00 |
| Household Goods and Furnishings | | | |
| Household goods - (See attached itemization) | 11 U.S.C. § 522(d)(3) | 853.00 | 853.00 |
| Wearing Apparel | | | |
| Necessary clothing | 11 U.S.C. § 522(d)(3) | 150.00 | 150.00 |
| Furs and Jewelry | | | |
| Misc. jewelry & wedding bands | 11 U.S.C. § 522(d)(4) | 250.00 | 250.00 |
| Interests in IRA, ERISA, Keogh, or Other Pension or Profit Sharing Plans | | | |
| (Wife) just started a 401K Plan, employer provided 100% exempt | 11 U.S.C. § 522(d)(10)(E) | 100% | 43.00 |
| Accounts Receivable | | | |
| (Husband) is owed \$3,000-\$4,000 for back wages from a previous employer. That employer has filed for bankruptcy protection and the debt may be uncollectible. | 11 U.S.C. § 522(d)(11)(E) | 4,000.00 | 4,000.00 |
| Automobiles, Trucks, Trailers, and Other Vehicles | | | |
| 1992 BMW 325(i) 160,000 miles. Kelley Blue Book, private party replacement value (fair condition) \$1,400 | 11 U.S.C. § 522(d)(2) | 1,400.00 | 1,400.00 |

Total: **7,096.00** **7,096.00**

0 continuation sheets attached to Schedule of Property Claimed as Exempt

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R H U S B A N D W I F E J O I N T C O M M U N I T Y | H U S B A N D W I F E J O I N T C O M M U N I T Y | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|---|---|--|--|--|--------------------------------------|--|---------------------------------|
| | | | | | | | | |
| Account No. xxxxxxxx0545 | | | Lien on vehicle title | | | | | |
| Landmark Credit Union 5445 S Westridge Dr New Berlin, WI 53151 | | C | 2008 Nissan Sentra, 52,000 miles. Kelley Blue Book, private party replacement value | | | | 17,000.00 | 5,600.00 |
| | | | Value \$ 11,400.00 | | | | | |
| Account No. | | | Representing: Landmark Credit Union | | | | Notice Only | |
| Darnieder & Geraghty 735 N. Water St. Ste. 930 Milwaukee, WI 53202 | | | Value \$ | | | | | |
| Account No. | | | 2006 | | | | | |
| Wisconsin Auto Title Loans 2825 S. 108th Street Milwaukee, WI 53227 | | C | lien on vehicle 1992 BMW 325(i) 160,000 miles. Kelley Blue Book, private party replacement value (fair condition) \$1,400 | | | | 5,239.89 | 3,839.89 |
| | | | Value \$ 1,400.00 | | | | | |
| Account No. | | | | | | | | |
| | | | Value \$ | | | | | |
| Subtotal (Total of this page) | | | | | | | 22,239.89 | 9,439.89 |
| Total (Report on Summary of Schedules) | | | | | | | 22,239.89 | 9,439.89 |

0 continuation sheets attached

WISCONSIN CERTIFICATE OF TITLE

| | | | | | |
|---|---------------------------------|-----------------------------|----------------------------------|----------------------------------|------------------------------------|
| Vehicle Identification Number 3N1AB61EX8L652296 | | Year 2008 | Make NISSAN | | |
| Title Number 092750102019-2 | Issue Date 10/02/2009 | Chassis Type AUTO | Odometer Reading 31356 | Odometer Status ACTUAL | Odometer Date 09/07/2009 |
| Product Number 82307092759 | Body Style 4DR SEDAN | Color BLACK | Fleet No. | | |

Titled Owner(s)
LEKOVIC VLADIMIR
835 W PUETZ RD
OAK CREEK, WI 53154

The person, firm or corporation named on this Title is the lawful owner of the vehicle described, subject to any Security Interest (liens) shown. The order in which the Lien Holders appear on this Title does not necessarily represent their priority. The Wisconsin Department of Transportation will not be responsible for false or fraudulent odometer statements made in the assignment of the Certificate of Title or for errors in reporting mileage, brand disclosures or the history of the vehicle. The department has no actual knowledge about the history of the vehicle and makes no warranty that the title brands or mileage disclosures on prior titles have been carried forward onto this document.

3N1AB61EX8L652296

Lien Holder(s)
00027779 LANDMARK CREDIT UNION, NEW BERLIN

Additional Vehicle Detail
PREVIOUSLY TITLED IN: AZ

SELLER: When the vehicle is sold, complete the ASSIGNMENT OF CERTIFICATE OF TITLE on the top back of this title and deliver the title to the purchaser with the vehicle. You may wish to retain a copy of this title with the purchaser's information and signature as proof of sale for your records.

PURCHASER: Apply for a new title with the Wisconsin Division of Motor Vehicles immediately. To legally operate this vehicle, you are required to register it with the Division of Motor Vehicles.



MAIL ADDRESS:
Wisconsin Department of Transportation
PO Box 7949, Madison, WI 53707-7949

QUESTIONS:
Contact the Division of Motor Vehicles at:
414-266-1800; 608-266-1486
www.dot.wisconsin.gov

8-1-8130434

1055 5/2004

977220

KEEP IN SAFE PLACE

DO NOT KEEP IN VEHICLE

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R H W J C | Husband, Wife, Joint, or Community | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|--|------------------------------------|---|--|--|--------------------------------------|--------------------|
| | | | | | | | |
| Account No. xxxxxxxx4812 A&S Collection Assoc Route 14 Williamstown, VT 05679 | | | Opened 8/01/06 Last Active 12/01/04 Collection Dominos Oconomowoc | | | | 109.00 |
| Account No. AAA Community Finance 6234 S. 27th Milwaukee, WI 53202 | | C | 2007 Unsecured loan | | | | 500.00 |
| Account No. xxxxx2601 Acct Recovery Service 3031 N. 114th Street Milwaukee, WI 53222 | | W | Opened 12/01/04 Last Active 5/01/04 Medical Bill - Watertown Memorial | | | | 678.00 |
| Account No. Watertown Memorial Hospital 125 Hospital Drive Watertown, WI 53098 | | | Representing: Acct Recovery Service | | | | Notice Only |
| Subtotal (Total of this page) | | | | | | | 1,287.00 |

25 continuation sheets attached

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|---|--|--|--------------------------------------|--|
| Account No. xx2693 American Collections 919 Estes Ct Schaumburg, IL 60193 | W | Opened 3/30/09 Last Active 1/01/09 Collection - Tcf National Bank | | | | 1,059.00 |
| Account No. TCF National Bank PO Box 17995 Milwaukee, WI 53217 | | Representing: American Collections | | | | Notice Only |
| Account No. xxxxxxxxxxxx6043 American General Finance Po Box 3251 Evansville, IN 47731 | W | Opened 2/03/04 Last Active 1/01/06 Deficiency on loan | | | | 571.00 |
| Account No. xxxxxx0001 Americollect Inc 1851 S Alverno Rd Manitowoc, WI 54220 | H | Opened 8/28/08 Last Active 5/01/08 Collection - Emergency Medical Associates | | | | 252.00 |
| Account No. Emergency Medical Associates 6400 Industrial Loop Greendale, WI 53129 | | Representing: Americollect Inc | | | | Notice Only |
| Sheet no. 1 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 1,882.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R R | Husband, Wife, Joint, or Community | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|--------------------------------------|--|------------------|---|--|--|--------------------------------------|--|
| Account No. xxxxxxxxx2994 Americollect Inc 1851 S Alverno Rd Manitowoc, WI 54220 | W | Opened 10/19/09 Collection - Roundys Food Store | | | | | | 55.00 |
| | | | | | | | | |
| Account No. Roundy's PO Box 070496 Milwaukee, WI 53207 | | Representing: Americollect Inc | | | | | | Notice Only |
| Account No. xxxxxxxxx2373 Americollect Inc 1851 S Alverno Rd Manitowoc, WI 54220 | W | Opened 10/12/09 Collection - Roundys Food Store | | | | | | 49.00 |
| | | | | | | | | |
| Account No. xxxxxxxxx1830 Americollect Inc 1851 S Alverno Rd Manitowoc, WI 54220 | W | Opened 10/19/09 Collection - Pick N Save Cudahy | | | | | | 43.00 |
| | | | | | | | | |
| Account No. xxxxxxxxx4023 Americollect Inc 1851 S Alverno Rd Manitowoc, WI 54220 | W | Opened 10/19/09 Collection - Roundys Food Store | | | | | | 40.00 |
| | | | | | | | | |
| Sheet no. 2 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | | Subtotal (Total of this page) 187.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|---|--|--|--------------------------------------|--|
| Account No. xxxxxxxx1043 Americollect Inc 1851 S Alverno Rd Manitowoc, WI 54220 | H | Opened 11/17/08 Last Active 9/01/08 Collection - Pick N Save Cudahy | | | | 35.00 |
| Account No. xxxx6752 Asset Management Out 401 Pilot Ct Ste A Waukesha, WI 53188 | W | Opened 9/19/09 Collection - US Cellular | | | | 729.00 |
| Account No. US Cellular P.O. Box 0203 Palatine, IL 60055-0203 | | Representing: Asset Management Out | | | | Notice Only |
| Account No. xxxx9410 Asset Management Out 401 Pilot Ct Ste A Waukesha, WI 53188 | H | Opened 5/27/10 Last Active 2/01/10 Collection - Emergency Medicine Specialists | | | | 643.00 |
| Account No. Emergency Medical Specialists C/O Eagle Collection Corp 553 S. Industrial Drive Hartland, WI 53029 | | Representing: Asset Management Out | | | | Notice Only |
| Sheet no. 3 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 1,407.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|--|------------------|---|--|--|--------------------------------------|--|
| Account No. xxxx9555 Asset Management Out 401 Pilot Ct Ste A Waukesha, WI 53188 | | Opened 5/27/10 Last Active 2/01/10 Collection - Emergency Medicine Specialists | H | | | | | 496.00 |
| Account No. EMPEC 9875 S. Franklin Drive PO Box 320930 Franklin, WI 53132-6151 | | Representing: Asset Management Out | | | | | | Notice Only |
| Account No. xxxx5467 Asset Management Out 401 Pilot Ct Ste A Waukesha, WI 53188 | | Opened 2/26/10 Last Active 11/01/09 Collection - Emergency Medicine Specialists | H | | | | | 433.00 |
| Account No. xxxx1880 Bureau Of Collection Recovery 7575 Corporate Way Eden Prairie, MN 55344 | | Opened 3/29/10 Last Active 2/01/10 Collection - Us Cellular | W | | | | | 758.00 |
| Account No. US Cellular P.O. Box 0203 Palatine, IL 60055-0203 | | Representing: Bureau Of Collection Recovery | | | | | | Notice Only |
| Sheet no. 4 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | | Subtotal (Total of this page) 1,687.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|---|--|--|--------------------------------------|--|
| | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| Account No. xxxxxxxx0933 Capital One Po Box 85520 Richmond, VA 23285 | H | Opened 4/30/07 Last Active 10/02/07 Credit Card | | | | Unknown |
| Account No. xxxxxxxx3709 Central Collection 10701 W. North Ave Milwaukee, WI 53226 | W | Opened 4/14/05 Collection - Wood Creek Apartments | | | | 1,700.00 |
| Account No. xxxxxxxx3073 Central Collections 10701 W. North Ave Milwaukee, WI 53226 | W | Opened 1/06/05 Collection - Wood Creek Apartments | | | | 5,550.00 |
| Account No. xxxxxxxx9202 Central Collections 10701 W. North Ave Milwaukee, WI 53226 | H | Opened 8/21/07 Last Active 10/29/07 Collection - Southridge Athletic club | | | | Unknown |
| Account No. xxxxx xxx-xxxx1986 Certegy P.O. Box 30046 Tampa, FL 33630 | W | Opened 11/01/08 Last Active 11/01/08 Collection - nsf | | | | 28.00 |
| Sheet no. <u>5</u> of <u>25</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 7,278.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|---|--|--|--------------------------------------|--|
| Account No. xxxxxxx5503 Chase Po Box 15298 Wilmington, DE 19850 | H | Opened 8/20/07 Last Active 2/01/08 Credit Card | | | | 750.00 |
| Account No. xxxxxxxxxxxxx1001 Chase Receivables 1247 Broadway Sonoma, CA 95476 | W | Opened 11/22/06 Collection - Harris Connect | | | | 98.00 |
| Account No. xxxxxx5201 Collection 360 Merrimack Street Mezzanine Level Lawrence, MA 01843 | W | Opened 2/01/10 Last Active 2/01/08 Collection - Us Cellular E W | | | | 683.00 |
| Account No. CPS Security PO Box 782408 San Antonio, TX 78278 | C | 2010 Collection - kohl's | | | | 1,244.03 |
| Account No. Kohl's PO Box 2983 Milwaukee, WI 53201 | | Representing: CPS Security | | | | Notice Only |
| Sheet no. 6 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 2,775.03 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|---|------------------|---|--|--|--------------------------------------|--|
| Account No. xx4718 Credit Management Cont Po Box 1654 Green Bay, WI 54305 | | Opened 6/10/08 Collection - Cooper Resource Center | W | | | | | 205.00 |
| Account No. xxxx2620 Credit Management Lp 4200 International Pkwy Carrollton, TX 75007 | | Opened 2/22/10 Last Active 1/01/10 Collection - Time Warner Milwauke | H | | | | | 270.00 |
| Account No. Time Warner Cable P.O. Box 3237 Milwaukee, WI 53201-3237 | | Representing: Credit Management Lp | | | | | | Notice Only |
| Account No. xx9903 Cybrcollect Po Box 1145 2350 South Ave Ste La Crosse, WI 54601 | | Opened 6/23/09 Collection - Woodmans | H | | | | | 264.00 |
| Account No. Monarch Law Office PO Box 1959 Portland, OR 97201 | | Representing: Cybrcollect | | | | | | Notice Only |
| Sheet no. <u>7</u> of <u>25</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | | Subtotal (Total of this page) 739.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|---|--|--|--------------------------------------|--|
| | | H W J C | | | | |
| Account No. xx9018 Cybrcollect Po Box 1145 2350 South Ave Ste La Crosse, WI 54601 | | Opened 6/21/09 Collection - Woodmans H | | | | 218.00 |
| Account No. xx1601 Cybrcollect Po Box 1145 2350 South Ave Ste La Crosse, WI 54601 | | Opened 6/25/09 Collection - Woodmans H | | | | 105.00 |
| Account No. xx1600 Cybrcollect Po Box 1145 2350 South Ave Ste La Crosse, WI 54601 | | Opened 6/24/09 Collection - Woodmans H | | | | 64.00 |
| Account No. xxx8951 Cybrcollect Inc 2350 South Ave La Crosse, WI 54601 | | Opened 4/10/10 Collection - Woodmans W | | | | 249.00 |
| Account No. xx5218 Cybrcollect Inc 2350 South Ave La Crosse, WI 54601 | | Opened 3/04/09 Collection - Woodmans W | | | | 211.00 |
| Sheet no. <u>8</u> of <u>25</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 847.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|------------------------------------|---|--|--|--------------------------------------|---|
| | | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| Account No. xxx1805 Cybrcollect Inc 2350 South Ave La Crosse, WI 54601 | | | Opened 5/23/10 Collection - Woodmans | | | | 208.00 |
| Account No. xxxxxx5CYB Cybrcollect Inc 2350 South Ave La Crosse, WI 54601 | | W | Opened 10/22/08 Collection - Woodmans | | | | 200.00 |
| Account No. xxxxxx7CYB Cybrcollect Inc 2350 South Ave La Crosse, WI 54601 | | W | Opened 10/27/08 Collection - Woodmans | | | | 197.00 |
| Account No. xxxxxx0CYB Cybrcollect Inc 2350 South Ave La Crosse, WI 54601 | | W | Opened 10/21/08 Collection - Woodmans | | | | 146.00 |
| Account No. xx6028 Cybrcollect Inc 2350 South Ave La Crosse, WI 54601 | | W | Opened 3/07/09 Collection - Woodmans | | | | 120.00 |
| Sheet no. 9 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | Subtotal (Total of this page) |
| | | | | | | | 871.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|--|------------------|---|--|--|--------------------------------------|---|
| Account No. xxx8952 Cybrcollect Inc 2350 South Ave La Crosse, WI 54601 | | Opened 4/11/10 Collection - Woodmans | W | | | | | 105.00 |
| Account No. xxxxxx6CYB Cybrcollect Inc 2350 South Ave La Crosse, WI 54601 | | Opened 10/22/08 Collection - Woodmans | W | | | | | 99.00 |
| Account No. xxx027A Cybrcollect Inc 2350 South Ave La Crosse, WI 54601 | | Opened 3/07/09 Collection - Woodmans | W | | | | | 96.00 |
| Account No. xxxxxxxx1345 Daniel R Koester DDS 132 E Drexel Ave Oak Creek, WI 53154 | | 2004 Judgment | C | | | | | 1,665.50 |
| Account No. Case Law Firm SC 400 N. Broadway Suite 402 Milwaukee, WI 53202 | | Representing: Daniel R Koester DDS | | | | | | Notice Only |
| Sheet no. 10 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | | Subtotal (Total of this page) 1,965.50 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R R | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|--------------------------------------|---|--|--|--------------------------------------|---|
| Account No. xxxxxxxxxxxx0325 Debt Credit Services 2493 Romig Rd Akron, OH 44320 | W | Opened 2/03/05 Last Active 1/01/05 Collection At T/Sbc-Wisconsin | | | | 1,749.00 |
| Account No. AT & T PO Box 8100 Aurora, IL 60507-8100 | | Representing: Debt Credit Services | | | | Notice Only |
| Account No. xxxxxxxx7756 Dickinson Financial LLC 100 S Fifth St, 1400 5th St Tower Minneapolis, MN 55402 | C | 2009 Judgment - Successor in interest to US Bank | | | | 9,436.07 |
| Account No. Messerli & Kramer 3033 Campus Dr., Suite 250 Plymouth, MN 55441-2662 | | Representing: Dickinson Financial LLC | | | | Notice Only |
| Account No. US Bancorp US Bancorp Center 800 Nicollet Mall Minneapolis, MN 55402 | | Representing: Dickinson Financial LLC | | | | Notice Only |
| Sheet no. 11 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 11,185.07 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|---|------------------|---|--|--|--------------------------------------|--|
| Account No. xxxxxxxx1352 Discover Card Po Box15316 Att:Cms/Prod Develop Wilmington, DE 19850-5316 | C | Opened 8/01/95 Last Active 12/01/05 Credit Card Notice | | Representing: Discover Card | | | | 2,032.00 |
| Account No. Discover Bankruptcy Department PO Box 8003 Hilliard, OH 43026 | | | W | Opened 2/02/05 Last Active 10/01/04 Collection - Dr George Pinero | | | | Notice Only |
| Account No. x135G Falls Collection Svc Po Box 668 Germantown, WI 53022 | W | | W | Opened 9/16/04 Collection Time Warner Cable 1 | | | | 249.00 |
| Account No. xxxxx306A Fincntrl Svc P O Box 668 N114 W19225 Clinton Germantown, WI 53022 | W | | W | | | | | 820.00 |
| Account No. xxxxx004A Fincntrl Svc P O Box 668 N114 W19225 Clinton Germantown, WI 53022 | W | | | | | | | 161.00 |
| Sheet no. 12 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | | Subtotal (Total of this page) 3,262.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|---|--|--|--------------------------------------|---|
| Account No. xxxxx903A Fincntrl Svc P O Box 668 N114 W19225 Clinton Germantown, WI 53022 | H | Opened 8/21/08 Collection Time Warner Cable 1 | | | | 18.00 |
| Account No. xxxxxxxxxxxx4691 First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104 | W | Opened 6/27/08 Last Active 1/01/09 ChargeAccount | | | | 439.00 |
| Account No. xxxxx4641 Flagship Credit Corporation 3 Christy Dr Ste 203 Chadds Ford, PA 19317 | C | Opened 10/03/07 Last Active 10/15/08 Deficiency of 2001 Audi A4 (\$5,000) | | | | 8,618.00 |
| Account No. Flagstar Credit Corporation 1379 Dilworthtown Crossing #220 West Chester, PA 19382 | | Representing: Flagship Credit Corporation | | | | Notice Only |
| Account No. xxxxxxxx5179 □ □ Get it Now 3726 S 27th St Milwaukee, WI 53221 | C | 2008 Judgment | | | | 1,509.49 |
| Sheet no. 13 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 10,584.49 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R R | Husband, Wife, Joint, or Community | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|--------------------------------------|--|------------------|---|--|--|--------------------------------------|--------------------|
| Account No. | | | | | | | | |
| Robert Hyndman, Attorney 8518 W. Capital Drive Milwaukee, WI 53222 | | Representing: Get it Now | | | | | | Notice Only |
| Account No. xxxxxxxxxxxxxxx5145 | | Opened 10/24/08 Last Active 10/24/08 InstallmentSalesContract | | | | | | |
| Get It Now 5700 Tennyson Park Plano, TX 75024 | | H | | | | | | 1,072.00 |
| Account No. xxxxxxxx9532 | | 2005 Judgment - Medical Bill | | | | | | |
| Gregory T. Isermann DDS 4369 S. Howell Ave Milwaukee, WI 53207-5055 | | C | | | | | | 273.00 |
| Account No. xxxxxx-xxxxxx3103 | | Opened 5/20/07 Last Active 9/26/08 ChargeAccount | | | | | | |
| Hsbc/Best Buy Po Box 15519 Wilmington, DE 19850 | | H | | | | | | 600.00 |
| Account No. xxxxxx-xxxxxx1889 | | Opened 7/02/07 Last Active 10/29/08 ChargeAccount | | | | | | |
| Hsbc/Boston Store Po Box 15521 Wilmington, DE 19805 | | H | | | | | | 2,000.00 |
| Sheet no. 14 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims <div style="text-align: right;"> Subtotal (Total of this page) </div> | | | | | | | | 3,945.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|--------------------------------------|--|--|--|--------------------------------------|--|
| Account No. xxxxxx8001 I C System Inc Po Box 64378 Saint Paul, MN 55164 | W | Opened 8/04/04 Last Active 12/01/03 Collection - Parkway Floral | | | | 80.00 |
| Account No. Parkway Floral 1001 Milwaukee Ave South Milwaukee, WI 53172 | | Representing: I C System Inc | | | | Notice Only |
| Account No. xxxxxxxx1003 Jefferson Capital Systems 16 Mcleland Rd Saint Cloud, MN 56303 | W | Opened 10/23/08 Last Active 10/19/08 Collection - Sprint Services | | | | 188.00 |
| Account No. Sprint 6391 Sprint Parkway Attn: Bankruptcy Services Overland Park, KS 66251-2850 | | Representing: Jefferson Capital Systems | | | | Notice Only |
| Account No. M & I Bank Marshall & Ilsey Bank 770 N. Water St. Milwaukee, WI 53202-3593 | C | 2008 Ovredraft | | | | 800.00 |
| Sheet no. 15 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 1,068.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R R | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|--------------------------------------|---|--|--|--------------------------------------|--|
| Account No. xxxxxxxxx7220 Macy's 9111 Duke Blvd Mason, OH 45040 | C | Opened 7/09/07 Last Active 7/01/09 ChargeAccount | | | | 1,423.00 |
| Account No. xx2862 Margraf Collections PO Box 306 Ft Atkinson, WI 53538 | W | Opened 1/04/05 Collection - Dominos Pizza | | | | 68.00 |
| Account No. xxxxxxx6878 Midland Credit Mgmt 8875 Aero Dr San Diego, CA 92123 | W | Opened 4/05/10 Last Active 1/01/08 Collection - Verizon Wireless | | | | 922.00 |
| Account No. Verizon Visa PO Box 142319 Irving, TX 75014 | | Representing: Midland Credit Mgmt | | | | Notice Only |
| Account No. xxxxxxxxx8970 Millenium Credit Con 149 E Thompson Ave West St Paul, MN 55118 | H | Opened 8/01/09 Last Active 6/01/09 Collection - Tcf National Bank | | | | 648.00 |
| Sheet no. 16 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 3,061.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|--|--|--|--------------------------------------|---|
| Account No. Mitsubishi Motors Credit of America Box 0538 Carol Stream, IL 60132 | C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. Repo | | | | 17,000.00 |
| Account No. xxxx72N3 Monco Law 611 N Barker Rd Suite 210 Brookfield, WI 53045 | W | Opened 1/30/09 Collection - Tri City National Bank | | | | 497.00 |
| Account No. Tri City National Bank 6400 S. 27th Street Oak Creek, WI 53154 | | Representing: Monco Law | | | | Notice Only |
| Account No. xxxx72N2 Monco Law 611 N Barker Rd Suite 210 Brookfield, WI 53045 | W | Opened 1/30/09 Collection - Tri City National | | | | 422.00 |
| Account No. National City Bank 125 East Puetz Road Oak Creek, WI 53154 | C | Credit Card | | | | 2,000.00 |
| Sheet no. <u>17</u> of <u>25</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 19,919.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R R | Husband, Wife, Joint, or Community | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|--------------------------------------|--|------------------|---|--|--|--------------------------------------|---|
| Account No. xxxx6718 Nco Fin/09 507 Prudential Rd Horsham, PA 19044 | | Opened 5/18/08 Last Active 1/01/06 Collection Directv | W | | | | | 247.00 |
| Account No. xxx7263 Oac Po Box 371068 Milwaukee, WI 53237 | | Opened 10/01/09 Last Active 8/01/09 Medical Bill - Ermed Sc | W | | | | | 643.00 |
| Account No. xxx4520 Oac Po Box 371068 Milwaukee, WI 53237 | | Opened 9/01/09 Last Active 7/01/09 Medical Bill - Aurora Medical | W | | | | | 614.00 |
| Account No. Aurora Health Care 3301 W Forest Home Ave Attn: Bankruptcy/Probate Milwaukee, WI 53215 | | Representing: Oac | | | | | | Notice Only |
| Account No. xx8333 Oac Po Box 371068 Milwaukee, WI 53237 | | Opened 9/01/07 Last Active 7/01/07 Medical Bill - Wisconsin Radiology | H | | | | | 498.00 |
| Sheet no. 18 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | | Subtotal (Total of this page) 2,002.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|--|------------------|---|--|--|--------------------------------------|--------------------|
| Account No. | | | | | | | | |
| Wisconsin Radiology Spec. S.C. PO Box 2350 Brookfield, WI 53008 | | Representing: Oac | | | | | | Notice Only |
| Account No. xxx7235 | | | | | | | | |
| Oac Po Box 371068 Milwaukee, WI 53237 | | Opened 10/01/09 Last Active 8/01/09 Medical Bill - Ermed Sc | W | | | | | 430.00 |
| Account No. | | | | | | | | |
| Payday Loan Store 5801 S Packard Ave Cudahy, WI 53110 | | 2010 Unsecured loan | C | | | | | 650.00 |
| Account No. | | | | | | | | |
| Payday Loan Store 5801 S Packard Ave Cudahy, WI 53110 | | 2010 Unsecured loan | C | | | | | 700.00 |
| Account No. | | | | | | | | |
| Payday Loan Store of WI, Inc. 3904 S. 27th St. Milwaukee, WI 53221 | | 2010 Unsecured loan | C | | | | | 1,500.00 |
| Sheet no. 19 of 25 sheets attached to Schedule of | | | | | | | | |
| Creditors Holding Unsecured Nonpriority Claims | | | | | | | | 3,280.00 |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Sheet no. **19** of **25** sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page)

3,280.00

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R R | Husband, Wife, Joint, or Community | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|--------------------------------------|---|------------------|---|--|--|--------------------------------------|--|
| Account No. xxx1969 Payliance 2612 Jackson Ave W Oxford, MS 38655 | | Opened 10/09/04 Last Active 10/01/04 Collection - Papa John S #2418 - | W | | | | | 62.00 |
| Account No. xxx1769 Payliance 2612 Jackson Ave W Oxford, MS 38655 | | Opened 12/31/04 Last Active 12/01/04 Collection - Pizza Hut #13466 - H | W | | | | | 58.00 |
| Account No. xxx1362 Professional Placement 272 N 12th St Milwaukee, WI 53233 | | Opened 9/14/09 Last Active 2/01/09 Collection - Lakeshore Medical Clinic | W | | | | | 120.00 |
| Account No. Lakeshore Medical Clinic P.O. Box 340140 Milwaukee, WI 53234-0140 | | Representing: Professional Placement | | | | | | Notice Only |
| Account No. xxx8040 Professional Placement 272 N 12th St Milwaukee, WI 53233 | | Opened 5/05/09 Last Active 11/01/08 Collection Lakeshore Medical Clinic | W | | | | | 70.00 |
| Sheet no. 20 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | | Subtotal (Total of this page) 310.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|---|------------------|---|--|--|--------------------------------------|---|
| Account No. xxx0022 Professional Placement 272 N 12th St Milwaukee, WI 53233 | | Opened 11/28/07 Collection Racine County Clerk | W | | | | 15.00 | |
| Account No. xxxx0796 Riddle Associates 11778 S Election D Draper, UT 84020 | | Opened 1/11/07 Collection - Directv | W | | | | 247.00 | |
| Account No. Direct TV P.O. Box 78626 Phoenix, AZ 85062 | | Representing: Riddle Associates | | | | | Notice Only | |
| Account No. x5333 Security Po Box 811 Consumer Verification Spartanburg, SC 29304 | | Opened 5/01/07 Last Active 7/01/07 ChargeAccount | W | | | | 285.00 | |
| Account No. xxxxxxxx0238 <input type="checkbox"/> <input type="checkbox"/> South Towne Village Apartments 333 South Towne Dr South Milwaukee, WI 53172 | | 2009 Judgment | C | | | | 1,521.86 | |
| Sheet no. 21 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | | Subtotal (Total of this page) 2,068.86 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|---|--|--|--------------------------------------|--|
| Account No. xxx1906 State Collection Service 2509 S Stoughton Rd Madison, WI 53716 | W | Opened 6/27/07 Collection - State Of Wisconsin-Of of Wisconsin | | | | 240.00 |
| Account No. Office of the State Public Defender P.O. Box 7923 Madison, WI 53707-7923 | | Representing: State Collection Service | | | | Notice Only |
| Account No. T-Mobile, Bankruptcy PO Box 37380 Albuquerque, NM 87176 | C | 2009 Cellular service | | | | 1,000.00 |
| Account No. xxxxxxxx1266 U S Bank 101 5th St E Ste A Saint Paul, MN 55101 | H | Opened 9/01/07 Last Active 8/20/09 ChargeAccount | | | | Unknown |
| Account No. Ultra Diamonds 11211 120th Ave. Pleasant Prairie, WI 53158 | C | 2009 Jewelry | | | | 2,500.00 |
| Sheet no. 22 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 3,740.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|--|--|--|--------------------------------------|--|
| Account No. GE Money Bank PO Box 960061 Orlando, FL 32896-0061 | | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. Representing: Ultra Diamonds | | | | Notice Only |
| Account No. xxxx7438 United Compucred 4190 Harrison Ave Cincinnati, OH 45211 | H | Opened 6/08/09 Collection Shoe Carnival | | | | 69.00 |
| Account No. xxxxx7677 United Compucred Collection 4190 Harrison Avenue Cincinnati, OH 45211 | C | 2010 Collection for Blockbuster | | | | 98.99 |
| Account No. xxxxxx1329 United Credit Service 15 N Lincoln St Elkhorn, WI 53121 | W | Opened 9/09/04 Last Active 5/01/04 Collection - Watertown Emergency | | | | 282.00 |
| Account No. xxxM203 Valley Credit Po Box 2125 Appleton, WI 54913 | H | Opened 6/11/09 Collection - Midwest Realty Management | | | | 1,541.00 |
| Sheet no. 23 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 1,990.99 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|---|--|--|--------------------------------------|--|
| Account No. xxxx203A Valley Credit Po Box 2125 Appleton, WI 54913 | H | Opened 6/11/09 Collection - Midwest Realty Management | | | | 1,286.00 |
| Account No. Waterstone Bank FSB 11200 West Plank Court Waterstone, WI 53226 | C | 2008 Collection | | | | 700.00 |
| Account No. xxxxxxxx1912 Wells Fargo Cards 3201 N 4th Ave Sioux Falls, SD 57104 | H | Opened 10/22/07 ChargeAccount | | | | 1,000.00 |
| Account No. xxxx9502 Wheaton Franciscan Healthcare Payment Processing Center PO Box 5434 Dept 0027 Carol Stream, IL 60197-5434 | C | 2010 Medical Bill | | | | 286.00 |
| Account No. xxxxxx1231 Wisconsin Electric Power 231 W Michigan St # A130 Milwaukee, WI 53203 | C | Opened 1/22/10 Utility Bill | | | | 776.00 |
| Sheet no. 24 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 4,048.00 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|--|--|--|--------------------------------------|--------------------|
| Account No. WE Energies Attn: Bankruptcy Department - A130 PO Box 2046 Milwaukee, WI 53201-2046 | | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. Representing: Wisconsin Electric Power | | | | Notice Only |
| Account No. xxxxxx8560 Zenith Acquisition 220 John Glenn Dr # 1 Amherst, NY 14228 | H | Opened 12/01/08 Last Active 10/01/08 Collection - Wells Fargo Financial | | | | 1,909.00 |
| Account No. | | | | | | |
| Account No. | | | | | | |
| Account No. | | | | | | |
| Sheet no. 25 of 25 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 1,909.00 |
| | | Total (Report on Summary of Schedules) | | | | 93,298.94 |

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

| Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract | Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. |
|--|--|
|--|--|

In re **Vladimir Lekovic,
Marija Lekovic**

Case No. _____

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
|------------------------------|------------------------------|

In re **Vladimir Lekovic**
Marija Lekovic

Case No. _____

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| | | |
|--|---------------------------------|--|
| Debtor's Marital Status: Married | DEPENDENTS OF DEBTOR AND SPOUSE | |
| | RELATIONSHIP(S): Son | AGE(S): 8 months |
| Employment: | DEBTOR | SPOUSE |
| Occupation | Route driver | Personal banker |
| Name of Employer | Fedex Home Delivery | US Bank |
| How long employed | 5 years | 3 months |
| Address of Employer | Oak Creek, WI 53154 | 801 S. 60th Street West Allis, WI 53325 |

INCOME: (Estimate of average or projected monthly income at time case filed)

1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)

2. Estimate monthly overtime

| DEBTOR | SPOUSE |
|--------------------|--------------------|
| \$ 2,383.33 | \$ 2,078.18 |
| \$ 0.00 | \$ 0.00 |

3. SUBTOTAL

| | |
|--------------------|--------------------|
| \$ 2,383.33 | \$ 2,078.18 |
|--------------------|--------------------|

4. LESS PAYROLL DEDUCTIONS

a. Payroll taxes and social security

b. Insurance

c. Union dues

d. Other (Specify): **401K**

| | |
|------------------|------------------|
| \$ 388.22 | \$ 248.00 |
| \$ 0.00 | \$ 2.98 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 41.56 |
| \$ 0.00 | \$ 0.00 |

5. SUBTOTAL OF PAYROLL DEDUCTIONS

| | |
|------------------|------------------|
| \$ 388.22 | \$ 292.54 |
|------------------|------------------|

6. TOTAL NET MONTHLY TAKE HOME PAY

| | |
|--------------------|--------------------|
| \$ 1,995.11 | \$ 1,785.64 |
|--------------------|--------------------|

7. Regular income from operation of business or profession or farm (Attach detailed statement)

8. Income from real property

9. Interest and dividends

10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above

11. Social security or government assistance

(Specify): _____

| | |
|----------------|----------------|
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |

12. Pension or retirement income

13. Other monthly income

(Specify): _____

| | |
|----------------|----------------|
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |

14. SUBTOTAL OF LINES 7 THROUGH 13

| | |
|----------------|----------------|
| \$ 0.00 | \$ 0.00 |
|----------------|----------------|

15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)

| | |
|--------------------|--------------------|
| \$ 1,995.11 | \$ 1,785.64 |
|--------------------|--------------------|

16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)

| |
|--------------------|
| \$ 3,780.75 |
|--------------------|

(Report also on Summary of Schedules and, if applicable, on
Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Husband has been experiencing a decrease in hours and expects this decline to continue

In re **Vladimir Lekovic**
Marija Lekovic

Case No. _____

Debtor(s) _____

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)
Detailed Expense Attachment

Other Expenditures:

| | | |
|---------------------------------------|----|---------------|
| Daycare | \$ | 541.25 |
| Automobile repairs/maintenance | \$ | 40.00 |
| Personal grooming expenses | \$ | 50.00 |
| Total Other Expenditures | \$ | 631.25 |

**United States Bankruptcy Court
Eastern District of Wisconsin**

In re **Vladimir Lekovic
Marija Lekovic**

Debtor(s)

Case No.

Chapter

7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **43** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **August 5, 2010**

Signature **/s/ Vladimir Lekovic**
Vladimir Lekovic
Debtor

Date **August 5, 2010**

Signature **/s/ Marija Lekovic**
Marija Lekovic
Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court
Eastern District of Wisconsin**

In re **Vladimir Lekovic
Marija Lekovic**

Debtor(s)

Case No.

Chapter

7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCE |
|--------------------|--|
| \$21,232.33 | 2010 Year to date gross income from employment/wages |
| \$26,886.00 | 2009 Gross income from employment/wages |
| \$12,045.00 | 2008 Gross income from employment/wages |
| \$3,843.97 | (Wife) 2010 Year to date gross income from employment/wages |
| \$878.00 | (Wife) 2009 Gross income from employment/wages |
| \$10,351.00 | (Wife) 2008 Gross income from employment/wages |

2. Income other than from employment or operation of business

None ☒ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

None ☒ *Complete a. or b., as appropriate, and c.*

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS
OF CREDITORDATES OF
PAYMENTS

AMOUNT PAID

AMOUNT STILL
OWING

None ☒ b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF
PAYMENTS/
TRANSFERSAMOUNT
PAID OR
VALUE OF
TRANSFERSAMOUNT STILL
OWING

None ☒ c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND
RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL
OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER
**Landmark Credit Union vs.
Vladimir LekovicCase
Number 2010SC020545**NATURE OF PROCEEDING
Small - ReplevinCOURT OR AGENCY
AND LOCATION
Milwaukee CountySTATUS OR
DISPOSITION
Filed 7-2-2010 Pending 8-6-2010**Dickinson Financial LLC vs.
Vladimir Lekovic Case
Number 2009CV017756****Civil - Money Judgment****Milwaukee County****Judgment 6-28-2010****McDermott Foley Johnson &
Wilson LLP vs. Marija
NikolicCase Number
2010SC012745****Small Claims****Milwaukee County****Dismissed**

* Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

CAPTION OF SUIT
AND CASE NUMBER
**South Towne Village Apts
vs. Vladimir LekovicCase
Number 2009SC010238**

NATURE OF PROCEEDING
Small Claims

COURT OR AGENCY
AND LOCATION
Milwaukee County

STATUS OR
DISPOSITION
Judgment

None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE
BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF
PROPERTY

5. Repossessions, foreclosures and returns

None ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF
CREDITOR OR SELLER
**Flagstar Credit Corporation
1379 Dilworthtown Crossing #220
West Chester, PA 19382**

DATE OF REPOSSESSION,
FORECLOSURE SALE,
TRANSFER OR RETURN
2009

DESCRIPTION AND VALUE OF
PROPERTY
Repo of 2001 Audi A4 (\$5,000)

6. Assignments and receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF
ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS
OF CUSTODIAN

NAME AND LOCATION
OF COURT
CASE TITLE & NUMBER

DATE OF
ORDER

DESCRIPTION AND VALUE OF
PROPERTY

7. Gifts

None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF
PERSON OR ORGANIZATION

RELATIONSHIP TO
DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND
VALUE OF GIFT

8. Losses

- None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| DESCRIPTION AND VALUE OF PROPERTY | DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS | DATE OF LOSS |
|--------------------------------------|--|--------------|
|--------------------------------------|--|--------------|

9. Payments related to debt counseling or bankruptcy

- None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

| NAME AND ADDRESS OF PAYEE | DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY |
|---|---|--|
| Law Offices of Dantzman & Dantzman 324 E. Wisconsin Ave Milwaukee, WI 53202 | 08/2010 | \$450.00 Attorney Fee \$299 Filing Fee \$35/each credit report |

10. Other transfers

- None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR | DATE | DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED |
|---|------|---|
|---|------|---|

- None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

| NAME OF TRUST OR OTHER DEVICE | DATE(S) OF TRANSFER(S) | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY |
|----------------------------------|---------------------------|---|
|----------------------------------|---------------------------|---|

11. Closed financial accounts

- None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF INSTITUTION | TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE | AMOUNT AND DATE OF SALE OR CLOSING |
|---------------------------------|--|---------------------------------------|
|---------------------------------|--|---------------------------------------|

12. Safe deposit boxes

- None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY | NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY | DESCRIPTION OF CONTENTS | DATE OF TRANSFER OR SURRENDER, IF ANY |
|--|---|-------------------------|---------------------------------------|
|--|---|-------------------------|---------------------------------------|

13. Setoffs

- None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATE OF SETOFF | AMOUNT OF SETOFF |
|------------------------------|----------------|------------------|
|------------------------------|----------------|------------------|

14. Property held for another person

- None ☒ List all property owned by another person that the debtor holds or controls.

| NAME AND ADDRESS OF OWNER | DESCRIPTION AND VALUE OF PROPERTY | LOCATION OF PROPERTY |
|---------------------------|-----------------------------------|----------------------|
|---------------------------|-----------------------------------|----------------------|

15. Prior address of debtor

- None ☐ If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

| ADDRESS | NAME USED | DATES OF OCCUPANCY |
|-------------------------------------|----------------------------------|--------------------|
| 835 W Puetz Rd, Oak Creek, WI 53154 | Vladimir Lekovic, Marija Nikolic | 2009 |

16. Spouses and Former Spouses

- None ☐ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME
Ilesha Lynette May (Ex- spouse)2008FA003142

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

- None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

| | | | |
|-----------------------|--|-------------------|----------------------|
| SITE NAME AND ADDRESS | NAME AND ADDRESS OF GOVERNMENTAL UNIT | DATE OF NOTICE | ENVIRONMENTAL LAW |
|-----------------------|--|-------------------|----------------------|

- None ☐ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

| | | | |
|-----------------------|--|-------------------|----------------------|
| SITE NAME AND ADDRESS | NAME AND ADDRESS OF GOVERNMENTAL UNIT | DATE OF NOTICE | ENVIRONMENTAL LAW |
|-----------------------|--|-------------------|----------------------|

- None ☐ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

| | | |
|--|---------------|-----------------------|
| NAME AND ADDRESS OF GOVERNMENTAL UNIT | DOCKET NUMBER | STATUS OR DISPOSITION |
|--|---------------|-----------------------|

18. Nature, location and name of business

- None ☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

| | | | | |
|------|--|---------|--------------------|-------------------------------|
| | LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. | | | |
| NAME | (ITIN)/ COMPLETE EIN | ADDRESS | NATURE OF BUSINESS | BEGINNING AND ENDING DATES |

- None ☐ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

| | |
|------|---------|
| NAME | ADDRESS |
|------|---------|

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

19. Books, records and financial statements

- None ☐ a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

| | |
|------------------|-------------------------|
| NAME AND ADDRESS | DATES SERVICES RENDERED |
|------------------|-------------------------|

- None ☐ b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

| NAME | ADDRESS | DATES SERVICES RENDERED |
|-----------|--|-------------------------|
| None ■ | c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain. | |

| NAME | ADDRESS |
|-----------|---|
| None ■ | d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case. |

| NAME AND ADDRESS | DATE ISSUED |
|------------------|-------------|
|------------------|-------------|

20. Inventories

| | |
|-----------|--|
| None ■ | a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory. |
|-----------|--|

| DATE OF INVENTORY | INVENTORY SUPERVISOR | DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis) |
|-------------------|----------------------|---|
|-------------------|----------------------|---|

| | | |
|-----------|---|--|
| None ■ | b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above. | |
|-----------|---|--|

| DATE OF INVENTORY | NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS |
|-------------------|---|
|-------------------|---|

21 . Current Partners, Officers, Directors and Shareholders

| | |
|-----------|--|
| None ■ | a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership. |
|-----------|--|

| NAME AND ADDRESS | NATURE OF INTEREST | PERCENTAGE OF INTEREST |
|------------------|--------------------|------------------------|
|------------------|--------------------|------------------------|

| | | |
|-----------|--|--|
| None ■ | b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation. | |
|-----------|--|--|

| NAME AND ADDRESS | TITLE | NATURE AND PERCENTAGE OF STOCK OWNERSHIP |
|------------------|-------|---|
|------------------|-------|---|

22 . Former partners, officers, directors and shareholders

| | |
|-----------|---|
| None ■ | a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case. |
|-----------|---|

| NAME | ADDRESS | DATE OF WITHDRAWAL |
|------|---------|--------------------|
|------|---------|--------------------|

| | | |
|-----------|---|--|
| None ■ | b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case. | |
|-----------|---|--|

| NAME AND ADDRESS | TITLE | DATE OF TERMINATION |
|------------------|-------|---------------------|
|------------------|-------|---------------------|

23 . Withdrawals from a partnership or distributions by a corporation

| | | |
|-----------|---|--|
| None ■ | If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case. | |
|-----------|---|--|

| NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR | DATE AND PURPOSE OF WITHDRAWAL | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY |
|---|-----------------------------------|--|
|---|-----------------------------------|--|

24. Tax Consolidation Group.

- None
■ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

- None
■ If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date **August 5, 2010**

Signature **/s/ Vladimir Lekovic**
Vladimir Lekovic
Debtor

Date **August 5, 2010**

Signature **/s/ Marija Lekovic**
Marija Lekovic
Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

**United States Bankruptcy Court
Eastern District of Wisconsin**

In re **Vladimir Lekovic
Marija Lekovic**

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| | | |
|---|----|-----------------|
| For legal services, I have agreed to accept | \$ | <u>1,050.00</u> |
| Prior to the filing of this statement I have received | \$ | <u>450.00</u> |
| Balance Due | \$ | <u>600.00</u> |

2. \$ 299.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

4. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of petition, means test and plan if applicable, reaffirmation agreements and applications as needed;

Should a situation arise where attorney cannot be present at the debtors 341 examination, debtor(s) have agreed to allow a portion of the attorney fee charged to be used to retain another attorney for this purpose.

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, avoidance of a second mortgage, relief from stay actions or any other adversary proceeding. Judgment satisfaction in state court following discharge. Preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. Plan modifications requested by debtor(s) and Mortgage rate/loan modification(s), property valuations/appraisals. Conversions from one chapter to another chapter are also not covered.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: August 5, 2010

/s/ Gregory T. Dantzman

**Gregory T. Dantzman 1032430
Law Offices of Dantzman & Dantzman
324 E. Wisconsin Ave
Milwaukee, WI 53202
414-831-0427 Fax: 414-831-0428**

**United States Bankruptcy Court
Eastern District of Wisconsin**

In re **Vladimir Lekovic
Marija Lekovic**

Debtor(s)

Case No.

Chapter

7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

| | |
|--|---|
| Property No. 1 | |
| Creditor's Name: Landmark Credit Union | Describe Property Securing Debt: 2008 Nissan Sentra, 52,000 miles. Kelley Blue Book, private party replacement value |
| Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained | |
| If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). | |
| Property is (check one): <input checked="" type="checkbox"/> Claimed as Exempt <input type="checkbox"/> Not claimed as exempt | |

| | |
|--|---|
| Property No. 2 | |
| Creditor's Name: Wisconsin Auto Title Loans | Describe Property Securing Debt: 1992 BMW 325(i) 160,000 miles. Kelley Blue Book, private party replacement value (fair condition) \$1,400 |
| Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained | |
| If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). | |
| Property is (check one): <input checked="" type="checkbox"/> Claimed as Exempt <input type="checkbox"/> Not claimed as exempt | |

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

| | | |
|--|----------------------------------|--|
| Property No. 1 | | |
| Lessor's Name: -NONE- | Describe Leased Property: | Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO |

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date August 5, 2010

Signature /s/ Vladimir Lekovic
Vladimir Lekovic
 Debtor

Date August 5, 2010

Signature /s/ Marija Lekovic
Marija Lekovic
 Joint Debtor

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF WISCONSIN**

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

**United States Bankruptcy Court
Eastern District of Wisconsin**

In re **Vladimir Lekovic**
Marija Lekovic

Debtor(s)

Case No.

Chapter

7

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE**

Certification of Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Vladimir Lekovic
Marija Lekovic

Printed Name(s) of Debtor(s)

Case No. (if known)

X **/s/ Vladimir Lekovic**

Signature of Debtor

August 5, 2010

Date

X **/s/ Marija Lekovic**

Signature of Joint Debtor (if any)

August 5, 2010

Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

**United States Bankruptcy Court
Eastern District of Wisconsin**

In re **Vladimir Lekovic**
Marija Lekovic

Debtor(s)

Case No. _____

Chapter **7**

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: **August 5, 2010**

/s/ Vladimir Lekovic

Vladimir Lekovic

Signature of Debtor

Date: **August 5, 2010**

/s/ Marija Lekovic

Marija Lekovic

Signature of Debtor

IRS
Insolvency Unit
211 W. Wisconsin Avenue
MS 5301 MIL
Milwaukee, WI 53203-2221

Wisconsin Department of Revenue
Special Procedures Unit
PO Box 8901
Madison, WI 53708-8901

IRS - Centralized Insolvency Operations
PO Box 21226
Philadelphia, PA 19114

A&S Collection Assoc
Route 14
Williamstown, VT 05679

AAA Community Finance
6234 S. 27th
Milwaukee, WI 53202

Acct Recovery Service
3031 N. 114th Street
Milwaukee, WI 53222

American Collections
919 Estes Ct
Schaumburg, IL 60193

American General Finance
Po Box 3251
Evansville, IN 47731

Americollect Inc
1851 S Alverno Rd
Manitowoc, WI 54220

Asset Management Out
401 Pilot Ct Ste A
Waukesha, WI 53188

AT & T
PO Box 8100
Aurora, IL 60507-8100

Aurora Health Care
3301 W Forest Home Ave
Attn: Bankruptcy/Probate
Milwaukee, WI 53215

Bureau Of Collection Recovery
7575 Corporate Way
Eden Prairie, MN 55344

Capital One
Po Box 85520
Richmond, VA 23285

Case Law Firm SC
400 N. Broadway Suite 402
Milwaukee, WI 53202

Central Collection
10701 W. North Ave
Milwaukee, WI 53226

Central Collections
10701 W. North Ave
Milwaukee, WI 53226

Certegy
P.O. Box 30046
Tampa, FL 33630

Chase
Po Box 15298
Wilmington, DE 19850

Chase Receivables
1247 Broadway
Sonoma, CA 95476

Collection
360 Merrimack Street Mezzanine Level
Lawrence, MA 01843

CPS Security
PO Box 782408
San Antonio, TX 78278

Credit Management Cont
Po Box 1654
Green Bay, WI 54305

Credit Management Lp
4200 International Pkwy
Carrollton, TX 75007

Cybrcollect
Po Box 1145 2350 South Ave Ste
La Crosse, WI 54601

Cybrcollect Inc
2350 South Ave
La Crosse, WI 54601

Daniel R Koester DDS
132 E Drexel Ave
Oak Creek, WI 53154

Darnieder & Geraghty
735 N. Water St. Ste. 930
Milwaukee, WI 53202

Debt Credit Services
2493 Romig Rd
Akron, OH 44320

Dickinson Financial LLC
100 S Fifth St, 1400 5th St Tower
Minneapolis, MN 55402

Direct TV
P.O. Box 78626
Phoenix, AZ 85062

Discover Bankruptcy Department
PO Box 8003
Hilliard, OH 43026

Discover Card
Po Box15316 Att:Cms/Prod Develop
Wilmington, DE 19850-5316

Emergency Medical Associates
6400 Industrial Loop
Greendale, WI 53129

Emergency Medical Specialists
C/O Eagle Collection Corp
553 S. Industrial Drive
Hartland, WI 53029

EMPEC
9875 S. Franklin Drive
PO Box 320930
Franklin, WI 53132-6151

Falls Collection Svc
Po Box 668
Germantown, WI 53022

Fincntrl Svc
P O Box 668 N114 W19225 Clinton
Germantown, WI 53022

First Premier Bank
601 S Minnesota Ave
Sioux Falls, SD 57104

Flagship Credit Corporation
3 Christy Dr Ste 203
Chadds Ford, PA 19317

Flagstar Credit Corporation
1379 Dilworthtown Crossing #220
West Chester, PA 19382

GE Money Bank
PO Box 960061
Orlando, FL 32896-0061

Get it Now
3726 S 27th St
Milwaukee, WI 53221

Get It Now
5700 Tennyson Park
Plano, TX 75024

Gregory T. Isermann DDS
4369 S. Howell Ave
Milwaukee, WI 53207-5055

Hsbc/Best Buy
Po Box 15519
Wilmington, DE 19850

Hsbc/Boston Store
Po Box 15521
Wilmington, DE 19805

I C System Inc
Po Box 64378
Saint Paul, MN 55164

Jefferson Capital Systems
16 Mclelland Rd
Saint Cloud, MN 56303

Kohl's
PO Box 2983
Milwaukee, WI 53201

Lakeshore Medical Clinic
P.O. Box 340140
Milwaukee, WI 53234-0140

Landmark Credit Union
5445 S Westridge Dr
New Berlin, WI 53151

M & I Bank
Marshall & Ilsey Bank
770 N. Water St.
Milwaukee, WI 53202-3593

Macy's
9111 Duke Blvd
Mason, OH 45040

Margraf Collections
PO Box 306
Ft Atkinson, WI 53538

Messerli & Kramer
3033 Campus Dr., Suite 250
Plymouth, MN 55441-2662

Midland Credit Mgmt
8875 Aero Dr
San Diego, CA 92123

Millenium Credit Con
149 E Thompson Ave
West St Paul, MN 55118

Mitsubishi Motors Credit of America
Box 0538
Carol Stream, IL 60132

Monarch Law Office
PO Box 1959
Portland, OR 97201

Monco Law
611 N Barker Rd Suite 210
Brookfield, WI 53045

National City Bank
125 East Puetz Road
Oak Creek, WI 53154

Nco Fin/09
507 Prudential Rd
Horsham, PA 19044

Oac
Po Box 371068
Milwaukee, WI 53237

Office of the State Public Defender
P.O. Box 7923
Madison, WI 53707-7923

Parkway Floral
1001 Milwaukee Ave
South Milwaukee, WI 53172

Payday Loan Store
5801 S Packard Ave
Cudahy, WI 53110

Payday Loan Store of WI, Inc.
3904 S. 27th St.
Milwaukee, WI 53221

Payliance
2612 Jackson Ave W
Oxford, MS 38655

Professional Placement
272 N 12th St
Milwaukee, WI 53233

Riddle Associates
11778 S Election D
Draper, UT 84020

Robert Hyndman, Attorney
8518 W. Capital Drive
Milwaukee, WI 53222

Roundy's
PO Box 070496
Milwaukee, WI 53207

Security
Po Box 811 Consumer Verification
Spartanburg, SC 29304

South Towne Village Apartments
333 South Towne Dr
South Milwaukee, WI 53172

Sprint
6391 Sprint Parkway
Attn: Bankruptcy Services
Overland Park, KS 66251-2850

State Collection Service
2509 S Stoughton Rd
Madison, WI 53716

T-Mobile, Bankruptcy
PO Box 37380
Albuquerque, NM 87176

TCF National Bank
PO Box 17995
Milwaukee, WI 53217

Time Warner Cable
P.O. Box 3237
Milwaukee, WI 53201-3237

Tri City National Bank
6400 S. 27th Street
Oak Creek, WI 53154

U S Bank
101 5th St E Ste A
Saint Paul, MN 55101

Ultra Diamonds
11211 120th Ave.
Pleasant Prairie, WI 53158

United Compucred
4190 Harrison Ave
Cincinnati, OH 45211

United Compucred Collection
4190 Harrison Avenue
Cincinnati, OH 45211

United Credit Service
15 N Lincoln St
Elkhorn, WI 53121

US Bancorp
US Bancorp Center
800 Nicollet Mall
Minneapolis, MN 55402

US Cellular
P.O. Box 0203
Palatine, IL 60055-0203

Valley Credit
Po Box 2125
Appleton, WI 54913

Verizon Visa
PO Box 142319
Irving, TX 75014

Waterstone Bank FSB
11200 West Plank Court
Waterstone, WI 53226

Watertown Memorial Hospital
125 Hospital Drive
Watertown, WI 53098

WE Energies
Attn: Bankruptcy Department - A130
PO Box 2046
Milwaukee, WI 53201-2046

Wells Fargo Cards
3201 N 4th Ave
Sioux Falls, SD 57104

Wheaton Franciscan Healthcare
Payment Processing Center
PO Box 5434 Dept 0027
Carol Stream, IL 60197-5434

Wisconsin Auto Title Loans
2825 S. 108th Street
Milwaukee, WI 53227

Wisconsin Electric Power
231 W Michigan St # A130
Milwaukee, WI 53203

Wisconsin Radiology Spec. S.C.
PO Box 2350
Brookfield, WI 53008

Zenith Acquisition
220 John Glenn Dr # 1
Amherst, NY 14228

In re **Vladimir Lekovic**
Marija Lekovic
 Debtor(s)
 Case Number: _____
 (If known)

According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):

- ☐ The presumption arises.
☒ The presumption does not arise.
☐ The presumption is temporarily inapplicable.

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

Part I. MILITARY AND NON-CONSUMER DEBTORS

| | |
|----|--|
| 1A | <p>Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.</p> <p><input type="checkbox"/> Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).</p> |
| 1B | <p>Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.</p> <p><input type="checkbox"/> Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.</p> |
| 1C | <p>Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.</p> <p><input type="checkbox"/> Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard</p> <div style="margin-left: 40px;"> <p>a. <input type="checkbox"/> I was called to active duty after September 11, 2001, for a period of at least 90 days and</p> <div style="margin-left: 40px;"> <input type="checkbox"/> I remain on active duty /or/ <input type="checkbox"/> I was released from active duty on _____, which is less than 540 days before this bankruptcy case was filed; </div> <p style="text-align: center;">OR</p> <p>b. <input type="checkbox"/> I am performing homeland defense activity for a period of at least 90 days /or/ <input type="checkbox"/> I performed homeland defense activity for a period of at least 90 days, terminating on _____, which is less than 540 days before this bankruptcy case was filed.</p> </div> |

Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION

| 2 | Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. <input type="checkbox"/> Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11. b. <input type="checkbox"/> Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only column A ("Debtor's Income") for Lines 3-11. c. <input type="checkbox"/> Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. d. <input checked="" type="checkbox"/> Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. | | | | | | | | | | | | | | | |
|---|--|-----------------------|---|---|-----------------------|-------------------|----------------|----------------|--|----------------|----------------|--|-----------------------------|--|----------------|----------------|
| | All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line. | | Column A Debtor's Income | Column B Spouse's Income | | | | | | | | | | | | |
| 3 | Gross wages, salary, tips, bonuses, overtime, commissions. | | \$ 3,033.19 | \$ 622.67 | | | | | | | | | | | | |
| 4 | Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V. <table border="1" style="width: 100%; margin-top: 5px;"> <thead> <tr> <th></th> <th style="text-align: center;">Debtor</th> <th style="text-align: center;">Spouse</th> </tr> </thead> <tbody> <tr> <td>a. Gross receipts</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>b. Ordinary and necessary business expenses</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>c. Business income</td> <td colspan="2">Subtract Line b from Line a</td> </tr> </tbody> </table> | | | Debtor | Spouse | a. Gross receipts | \$ 0.00 | \$ 0.00 | b. Ordinary and necessary business expenses | \$ 0.00 | \$ 0.00 | c. Business income | Subtract Line b from Line a | | \$ 0.00 | \$ 0.00 |
| | Debtor | Spouse | | | | | | | | | | | | | | |
| a. Gross receipts | \$ 0.00 | \$ 0.00 | | | | | | | | | | | | | | |
| b. Ordinary and necessary business expenses | \$ 0.00 | \$ 0.00 | | | | | | | | | | | | | | |
| c. Business income | Subtract Line b from Line a | | | | | | | | | | | | | | | |
| 5 | Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V. <table border="1" style="width: 100%; margin-top: 5px;"> <thead> <tr> <th></th> <th style="text-align: center;">Debtor</th> <th style="text-align: center;">Spouse</th> </tr> </thead> <tbody> <tr> <td>a. Gross receipts</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>b. Ordinary and necessary operating expenses</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>c. Rent and other real property income</td> <td colspan="2">Subtract Line b from Line a</td> </tr> </tbody> </table> | | | Debtor | Spouse | a. Gross receipts | \$ 0.00 | \$ 0.00 | b. Ordinary and necessary operating expenses | \$ 0.00 | \$ 0.00 | c. Rent and other real property income | Subtract Line b from Line a | | \$ 0.00 | \$ 0.00 |
| | Debtor | Spouse | | | | | | | | | | | | | | |
| a. Gross receipts | \$ 0.00 | \$ 0.00 | | | | | | | | | | | | | | |
| b. Ordinary and necessary operating expenses | \$ 0.00 | \$ 0.00 | | | | | | | | | | | | | | |
| c. Rent and other real property income | Subtract Line b from Line a | | | | | | | | | | | | | | | |
| 6 | Interest, dividends, and royalties. | | \$ 0.00 | \$ 0.00 | | | | | | | | | | | | |
| 7 | Pension and retirement income. | | \$ 0.00 | \$ 0.00 | | | | | | | | | | | | |
| 8 | Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. | | \$ 0.00 | \$ 0.00 | | | | | | | | | | | | |
| 9 | Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: | | \$ 0.00 | \$ 0.00 | | | | | | | | | | | | |
| | <table border="1" style="width: 100%;"> <tr> <td style="width: 40%;">Unemployment compensation claimed to be a benefit under the Social Security Act</td> <td style="width: 30%;">Debtor \$ 0.00</td> <td style="width: 30%;">Spouse \$ 0.00</td> </tr> </table> | | Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ 0.00 | Spouse \$ 0.00 | \$ 0.00 | \$ 0.00 | | | | | | | | | |
| Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ 0.00 | Spouse \$ 0.00 | | | | | | | | | | | | | | |
| 10 | Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. | | \$ 0.00 | \$ 0.00 | | | | | | | | | | | | |
| | <table border="1" style="width: 100%;"> <thead> <tr> <th></th> <th style="text-align: center;">Debtor</th> <th style="text-align: center;">Spouse</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td style="width: 40%;"></td> <td style="width: 20%;"></td> </tr> <tr> <td>b.</td> <td></td> <td></td> </tr> </tbody> </table> | | | Debtor | Spouse | a. | | | b. | | | \$ 0.00 | \$ 0.00 | | | |
| | Debtor | Spouse | | | | | | | | | | | | | | |
| a. | | | | | | | | | | | | | | | | |
| b. | | | | | | | | | | | | | | | | |
| | Total and enter on Line 10 | | \$ 0.00 | \$ 0.00 | | | | | | | | | | | | |
| 11 | Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s). | | \$ 3,033.19 | \$ 622.67 | | | | | | | | | | | | |

| | | |
|---|--|---------------------|
| 12 | Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A. | \$ 3,655.86 |
| Part III. APPLICATION OF § 707(b)(7) EXCLUSION | | |
| 13 | Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result. | \$ 43,870.32 |
| 14 | Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: <u>WI</u> b. Enter debtor's household size: <u>3</u> | \$ 67,881.00 |
| 15 | Application of Section 707(b)(7). Check the applicable box and proceed as directed. <input checked="" type="checkbox"/> The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII. <input type="checkbox"/> The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement. | |

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

| | | | | | | | | | | | | | | |
|---|--|----|--|----|----|--|----|----|--|----|----|--|----|----|
| Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2) | | | | | | | | | | | | | | |
| 16 | Enter the amount from Line 12. | \$ | | | | | | | | | | | | |
| 17 | Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero. | | | | | | | | | | | | | |
| | <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 60%;"></td> <td style="width: 35%; text-align: right;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td></td> <td style="text-align: right;">\$</td> </tr> <tr> <td style="text-align: center;">c.</td> <td></td> <td style="text-align: right;">\$</td> </tr> <tr> <td style="text-align: center;">d.</td> <td></td> <td style="text-align: right;">\$</td> </tr> </table> | a. | | \$ | b. | | \$ | c. | | \$ | d. | | \$ | \$ |
| a. | | \$ | | | | | | | | | | | | |
| b. | | \$ | | | | | | | | | | | | |
| c. | | \$ | | | | | | | | | | | | |
| d. | | \$ | | | | | | | | | | | | |
| Total and enter on Line 17 | | \$ | | | | | | | | | | | | |
| 18 | Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result. | \$ | | | | | | | | | | | | |

Part V. CALCULATION OF DEDUCTIONS FROM INCOME

Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)

| 19A | National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | \$ | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|--|----------------------|--|--|--|-----|----------------------|--|-----|----------------------|--|-----|-------------------|--|-----|-------------------|--|-----|----------|--|-----|----------|--|----|
| 19B | National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B. | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <table style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">Household members under 65 years of age</th> <th colspan="3" style="text-align: left; padding: 2px;">Household members 65 years of age or older</th> </tr> <tr> <td style="width: 5%; text-align: center;">a1.</td> <td style="width: 40%;">Allowance per member</td> <td style="width: 15%;"></td> <td style="width: 5%; text-align: center;">a2.</td> <td style="width: 40%;">Allowance per member</td> <td style="width: 15%;"></td> </tr> <tr> <td style="text-align: center;">b1.</td> <td>Number of members</td> <td></td> <td style="text-align: center;">b2.</td> <td>Number of members</td> <td></td> </tr> <tr> <td style="text-align: center;">c1.</td> <td>Subtotal</td> <td></td> <td style="text-align: center;">c2.</td> <td>Subtotal</td> <td></td> </tr> </table> | Household members under 65 years of age | | | Household members 65 years of age or older | | | a1. | Allowance per member | | a2. | Allowance per member | | b1. | Number of members | | b2. | Number of members | | c1. | Subtotal | | c2. | Subtotal | | \$ |
| Household members under 65 years of age | | | Household members 65 years of age or older | | | | | | | | | | | | | | | | | | | | | | | |
| a1. | Allowance per member | | a2. | Allowance per member | | | | | | | | | | | | | | | | | | | | | | |
| b1. | Number of members | | b2. | Number of members | | | | | | | | | | | | | | | | | | | | | | |
| c1. | Subtotal | | c2. | Subtotal | | | | | | | | | | | | | | | | | | | | | | |
| 20A | Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | \$ | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | |
|-----|--|------------------------------|--|----|----|--|----|----|---|------------------------------|----|
| 20B | <p>Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 75%;">IRS Housing and Utilities Standards; mortgage/rental expense</td><td style="width: 20%;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42</td><td>\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net mortgage/rental expense</td><td>Subtract Line b from Line a.</td></tr> </table> | a. | IRS Housing and Utilities Standards; mortgage/rental expense | \$ | b. | Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42 | \$ | c. | Net mortgage/rental expense | Subtract Line b from Line a. | \$ |
| a. | IRS Housing and Utilities Standards; mortgage/rental expense | \$ | | | | | | | | | |
| b. | Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42 | \$ | | | | | | | | | |
| c. | Net mortgage/rental expense | Subtract Line b from Line a. | | | | | | | | | |
| 21 | <p>Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:</p> <hr style="border: 0.5px solid black;"/> | \$ | | | | | | | | | |
| 22A | <p>Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8. <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 or more. If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p> | \$ | | | | | | | | | |
| 22B | <p>Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p> | \$ | | | | | | | | | |
| 23 | <p>Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) <input type="checkbox"/> 1 <input type="checkbox"/> 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 75%;">IRS Transportation Standards, Ownership Costs</td><td style="width: 20%;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42</td><td>\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 1</td><td>Subtract Line b from Line a.</td></tr> </table> | a. | IRS Transportation Standards, Ownership Costs | \$ | b. | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 | \$ | c. | Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a. | \$ |
| a. | IRS Transportation Standards, Ownership Costs | \$ | | | | | | | | | |
| b. | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 | \$ | | | | | | | | | |
| c. | Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a. | | | | | | | | | |
| 24 | <p>Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 75%;">IRS Transportation Standards, Ownership Costs</td><td style="width: 20%;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42</td><td>\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 2</td><td>Subtract Line b from Line a.</td></tr> </table> | a. | IRS Transportation Standards, Ownership Costs | \$ | b. | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 | \$ | c. | Net ownership/lease expense for Vehicle 2 | Subtract Line b from Line a. | \$ |
| a. | IRS Transportation Standards, Ownership Costs | \$ | | | | | | | | | |
| b. | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 | \$ | | | | | | | | | |
| c. | Net ownership/lease expense for Vehicle 2 | Subtract Line b from Line a. | | | | | | | | | |
| 25 | <p>Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.</p> | \$ | | | | | | | | | |
| 26 | <p>Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.</p> | \$ | | | | | | | | | |

| | | | | | | | | | | | |
|--|---|----|------------------|----|----|----------------------|----|----|------------------------|----|---|
| 27 | Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. | \$ | | | | | | | | | |
| 28 | Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. | \$ | | | | | | | | | |
| 29 | Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. | \$ | | | | | | | | | |
| 30 | Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. | \$ | | | | | | | | | |
| 31 | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. | \$ | | | | | | | | | |
| 32 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. | \$ | | | | | | | | | |
| 33 | Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32. | \$ | | | | | | | | | |
| Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32 | | | | | | | | | | | |
| 34 | Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. <table border="1" style="width: 100%;"> <tr> <td style="width: 5%;">a.</td> <td style="width: 75%;">Health Insurance</td> <td style="width: 20%;">\$</td> </tr> <tr> <td>b.</td> <td>Disability Insurance</td> <td>\$</td> </tr> <tr> <td>c.</td> <td>Health Savings Account</td> <td>\$</td> </tr> </table> <p>Total and enter on Line 34.</p> <p>If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:</p> <p>\$ _____</p> | a. | Health Insurance | \$ | b. | Disability Insurance | \$ | c. | Health Savings Account | \$ | \$ <div style="background-color: #cccccc; height: 40px; width: 100%;"></div> |
| a. | Health Insurance | \$ | | | | | | | | | |
| b. | Disability Insurance | \$ | | | | | | | | | |
| c. | Health Savings Account | \$ | | | | | | | | | |
| 35 | Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. | \$ | | | | | | | | | |
| 36 | Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. | \$ | | | | | | | | | |
| 37 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. | \$ | | | | | | | | | |
| 38 | Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. | \$ | | | | | | | | | |

* Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| 39 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. | \$ | | | | | | | | | | | | | | | |
|--|---|-------------------------------|--|--|---------------------------|--|----|----|---|-------------------------------|--|--|------------------|----|------------------|--|----|
| 40 | Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). | \$ | | | | | | | | | | | | | | | |
| 41 | Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40 | \$ | | | | | | | | | | | | | | | |
| Subpart C: Deductions for Debt Payment | | | | | | | | | | | | | | | | | |
| 42 | Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42. | \$ | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 5%;"></th> <th style="width: 30%;">Name of Creditor</th> <th style="width: 30%;">Property Securing the Debt</th> <th style="width: 15%;">Average Monthly Payment</th> <th style="width: 20%;">Does payment include taxes or insurance?</th> </tr> <tr> <td style="text-align: center;">a.</td> <td></td> <td></td> <td style="text-align: right;">\$</td> <td style="text-align: center;"><input type="checkbox"/> yes <input type="checkbox"/> no</td> </tr> <tr> <td colspan="3"></td> <td style="text-align: right;">Total: Add Lines</td> <td></td> </tr> </table> | | | Name of Creditor | Property Securing the Debt | Average Monthly Payment | Does payment include taxes or insurance? | a. | | | \$ | <input type="checkbox"/> yes <input type="checkbox"/> no | | | | Total: Add Lines | | \$ |
| | Name of Creditor | Property Securing the Debt | Average Monthly Payment | Does payment include taxes or insurance? | | | | | | | | | | | | | |
| a. | | | \$ | <input type="checkbox"/> yes <input type="checkbox"/> no | | | | | | | | | | | | | |
| | | | Total: Add Lines | | | | | | | | | | | | | | |
| 43 | Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. | \$ | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 5%;"></th> <th style="width: 30%;">Name of Creditor</th> <th style="width: 30%;">Property Securing the Debt</th> <th style="width: 35%;">1/60th of the Cure Amount</th> </tr> <tr> <td style="text-align: center;">a.</td> <td></td> <td></td> <td style="text-align: right;">\$</td> </tr> <tr> <td colspan="3"></td> <td style="text-align: right;">Total: Add Lines</td> </tr> </table> | | | Name of Creditor | Property Securing the Debt | 1/60th of the Cure Amount | a. | | | \$ | | | | Total: Add Lines | \$ | | | |
| | Name of Creditor | Property Securing the Debt | 1/60th of the Cure Amount | | | | | | | | | | | | | | |
| a. | | | \$ | | | | | | | | | | | | | | |
| | | | Total: Add Lines | | | | | | | | | | | | | | |
| 44 | Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28. | \$ | | | | | | | | | | | | | | | |
| 45 | Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense. | \$ | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 60%;">Projected average monthly Chapter 13 plan payment.</td> <td style="width: 35%; text-align: right;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</td> <td style="text-align: center;">x</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Average monthly administrative expense of Chapter 13 case</td> <td style="text-align: right;">Total: Multiply Lines a and b</td> </tr> </table> | | a. | Projected average monthly Chapter 13 plan payment. | \$ | b. | Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | x | c. | Average monthly administrative expense of Chapter 13 case | Total: Multiply Lines a and b | \$ | | | | | | |
| a. | Projected average monthly Chapter 13 plan payment. | \$ | | | | | | | | | | | | | | | |
| b. | Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | x | | | | | | | | | | | | | | | |
| c. | Average monthly administrative expense of Chapter 13 case | Total: Multiply Lines a and b | | | | | | | | | | | | | | | |
| 46 | Total Deductions for Debt Payment. Enter the total of Lines 42 through 45. | \$ | | | | | | | | | | | | | | | |
| Subpart D: Total Deductions from Income | | | | | | | | | | | | | | | | | |
| 47 | Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46. | \$ | | | | | | | | | | | | | | | |
| Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION | | | | | | | | | | | | | | | | | |
| 48 | Enter the amount from Line 18 (Current monthly income for § 707(b)(2)) | \$ | | | | | | | | | | | | | | | |
| 49 | Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2)) | \$ | | | | | | | | | | | | | | | |
| 50 | Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result. | \$ | | | | | | | | | | | | | | | |
| 51 | 60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result. | \$ | | | | | | | | | | | | | | | |

| | | | |
|---|--|---|----|
| 52 | <p>Initial presumption determination. Check the applicable box and proceed as directed.</p> <p><input type="checkbox"/> The amount on Line 51 is less than \$7,025*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.</p> <p><input type="checkbox"/> The amount set forth on Line 51 is more than \$11,725*. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.</p> <p><input type="checkbox"/> The amount on Line 51 is at least \$7,025*, but not more than \$11,725*. Complete the remainder of Part VI (Lines 53 through 55).</p> | | |
| 53 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 85%;">Enter the amount of your total non-priority unsecured debt</td> <td style="width: 15%; text-align: center;">\$</td> </tr> </table> | Enter the amount of your total non-priority unsecured debt | \$ |
| Enter the amount of your total non-priority unsecured debt | \$ | | |
| 54 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 85%;">Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.</td> <td style="width: 15%; text-align: center;">\$</td> </tr> </table> | Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result. | \$ |
| Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result. | \$ | | |
| 55 | <p>Secondary presumption determination. Check the applicable box and proceed as directed.</p> <p><input type="checkbox"/> The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.</p> <p><input type="checkbox"/> The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.</p> | | |

Part VII. ADDITIONAL EXPENSE CLAIMS

| 56 | <p>Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 60%;">Expense Description</th> <th style="width: 35%;">Monthly Amount</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">a.</td> <td></td> <td style="text-align: center;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td></td> <td style="text-align: center;">\$</td> </tr> <tr> <td style="text-align: center;">c.</td> <td></td> <td style="text-align: center;">\$</td> </tr> <tr> <td style="text-align: center;">d.</td> <td></td> <td style="text-align: center;">\$</td> </tr> <tr> <td colspan="2" style="text-align: right;">Total: Add Lines a, b, c, and d</td> <td style="text-align: center;">\$</td> </tr> </tbody> </table> | | Expense Description | Monthly Amount | a. | | \$ | b. | | \$ | c. | | \$ | d. | | \$ | Total: Add Lines a, b, c, and d | | \$ |
|---------------------------------|--|----------------|---------------------|----------------|----|--|----|----|--|----|----|--|----|----|--|----|---------------------------------|--|----|
| | Expense Description | Monthly Amount | | | | | | | | | | | | | | | | | |
| a. | | \$ | | | | | | | | | | | | | | | | | |
| b. | | \$ | | | | | | | | | | | | | | | | | |
| c. | | \$ | | | | | | | | | | | | | | | | | |
| d. | | \$ | | | | | | | | | | | | | | | | | |
| Total: Add Lines a, b, c, and d | | \$ | | | | | | | | | | | | | | | | | |

Part VIII. VERIFICATION

| | | | | | |
|-----------------------------|--|-----------------------------|--|-----------------------------|--|
| 57 | <p>I declare under penalty of perjury that the information provided in this statement is true and correct. <i>(If this is a joint case, both debtors must sign.)</i></p> <table style="width: 100%;"> <tr> <td style="width: 50%;"> Date: <u>August 5, 2010</u> </td> <td style="width: 50%;"> Signature: <u>/s/ Vladimir Lekovic</u> Vladimir Lekovic <i>(Debtor)</i> </td> </tr> <tr> <td> Date: <u>August 5, 2010</u> </td> <td> Signature: <u>/s/ Marija Lekovic</u> Marija Lekovic <i>(Joint Debtor, if any)</i> </td> </tr> </table> | Date: <u>August 5, 2010</u> | Signature: <u>/s/ Vladimir Lekovic</u> Vladimir Lekovic <i>(Debtor)</i> | Date: <u>August 5, 2010</u> | Signature: <u>/s/ Marija Lekovic</u> Marija Lekovic <i>(Joint Debtor, if any)</i> |
| Date: <u>August 5, 2010</u> | Signature: <u>/s/ Vladimir Lekovic</u> Vladimir Lekovic <i>(Debtor)</i> | | | | |
| Date: <u>August 5, 2010</u> | Signature: <u>/s/ Marija Lekovic</u> Marija Lekovic <i>(Joint Debtor, if any)</i> | | | | |

* Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.